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Fax Cover Sheet

Date: 12/27/04
09 Jun 2004

To: ATT. Dr. Mr. Gordon

U.S. Application/Control Number: 88# 1078 6300

From: Dr. S. L. HAKER PATEL

Art Unit: 1624

Fax No.: 617 832 7000

Phone No.: (8) 571 272 0671

Voice No.: Tel. 617 832 1765

Return Fax No.: Office 571 273 0671

Re: STATUS AT YOUR END

cc: Residence 301 515 8147

☒ Urgent ☐ For Review ☐ For Comment ☐ For Reply ☐ Per Your Request

- Comments:
- ① NEED YOUR OK TO DELETE CLAIM 1 (WHICH IS CANCELLED THRU YOUR AMENDMENT DATED 7/26/04 IN CLAIMS 74-78, 82, 84, 85, 96, 110. ADDITIONALLY
 - ② CLAIM 80 ALSO DEPENDS ON CLAIMS 1, 12, 20 WHICH ARE CANCELLED. DELETE CLAIMS 1, 12, 20 FROM
 - ③ NEED YOUR OK TO DELETE THE CLAIMS WHERE THEY ARE
 - ④ B-1 COB / TODAY THX APPROX. REPLY
 - ④ Refers to my message 12/28/04 1624

Number of pages 1 including this page

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Date: 12/27/04
09 Jan 2005To: ATT. Dr. Mr. Gordon
ATT-DOCKET SPV 042.02

From: Dr. S. L. HAKER PATER

U.S. Application/Control Number: 88# 1076 6300

Art Unit: 1624

Fax No.: 617 832 7500

Phone No.: (617) 571 272 0671

Voice No.: Tel. 617 832 1765

Return Fax No.: Office 571 273 0671

Re: STATUS AT YOUR END

Residence 301 515 8147

☒ Urgent ☐ For Review ☐ For Comment ☐ For Reply ☐ Per Your Request

- Comments:
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 - ② CLAIM 80 ALSO DEPENDS ON CLAIMS 1, 12, 20 WHICH ARE CANCELLED
 - ③ WE NEED YOUR OK TO DELETE CLAIMS 1, 12, 20 FROM THE CLAIMS WHERE THEY
 - ④ B-1 COB / TODAY THX APPROX
PL REPLY
 - ④ Refers to my message 12/28/04 1624

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